

District of Columbia Title V Priorities and Performance

WOMEN/MATERNAL HEALTH

Priority: Improving women's reproductive health

- Goal: Increase use of preventive care services among reproductive age women
- Goal: Decrease unplanned pregnancies
- Goal: Reduce chronic disease burden (including tobacco use) among reproductive age women

NPM 1: Well woman visit

Objectives:

1. Increase the percent of women ages 18-44 that receive a preventive visit.

Strategies:

1. Title V will support initiatives that promote establishing a medical home and routine well visits for reproductive aged women.
 - a. Work with perinatal programs (WIC, Healthy Start, MIECHV, Text 4 Baby) to incorporate tools to support regular wellness visits among adult women program participants.
 - b. Support a FQHC to increase well woman visits through use of *promotoras* (outreach and education); quality improvement projects (appointment reminders, population management through electronic health records, clinical workflows); and identifying and addressing psychosocial barriers to preventive care.
 - c. Promote annual well visits through mobile health.
2. Identify current barriers to preventive care to inform future initiatives.
 - a. Work with PRAMS to include questions assessing barriers to primary care, and use results to create programs to reduce barriers.

PERINATAL/INFANT HEALTH

Priority: Decreasing perinatal disparities

- Goal: Decrease infant mortality
- Goal: Increase breastfeeding initiation and duration

NPM 4: Breastfeeding

Objectives:

1. Increase the percent of breastfed infants.
2. Increase the percent of infants exclusively breastfed through 6 months.

Strategies:

1. Provide technical and financial support for birthing facilities to implement Baby-Friendly Hospital Initiative (BFHI) designation.
2. Expand the availability and utilization of peer counselors to support low-income women in partnership with WIC, MIECHV, Healthy Start and local health providers.
 - a. Increase breastfeeding education among MIECHV home visitors and Healthy Start support workers.

3. Increase the availability of mobile-health (mhealth) resources for breastfeeding support (i.e. Text 4 Baby, Pacify and BFed DC).

CHILD HEALTH

Priority: Reducing chronic disease burden (including obesity) among children and youth

- Goal: Increase early identification of developmental delays and linkages to care to mitigate long term sequela
- Goal: Increase the number of children and adolescents engaging in recommended daily physical activity
- Goal: Increase access to healthful foods for children living in food deserts
- Goal: Increasing number of children and adolescents with medical homes receiving regular preventive care
- Goal: Reduce childhood tobacco exposure

NPM 6: Developmental Screening

Objectives:

1. Increase the percent of children, ages 10 through 71 months, receiving a developmental screening using a parent tool.

Strategies:

2. Support programs and initiatives that provide developmental screenings and linkages to resources and services.
 - a. Support IDEA Part C Service Coordination for children 0 to 2 years with identified developmental disability or delay.
 - b. Establish Help Me Grow network to improve linkages to resources for children at risk for developmental delays and disabilities.
3. Collaborate with District agencies and early childhood providers to explore best practices and feasibility of implementing a state registry for developmental screening to improve care coordination.

NPM 8- Physical Activity

Objectives:

1. Increase physical activity among children ages 6 through 11 and adolescents ages 12 through 17 to 60 minutes a day.

Strategies:

1. Increase capacity for local education agencies to implement physical activity requirements and education guidelines through technical assistance and mini-grants for supplies.
2. Support school-based after school physical activity and nutrition programs for children/adolescents age 6-17 years old

SPM 1- Healthy Food Access

Objectives:

1. Decrease the percent of children living in households that were food insecure at any point during the year.

Strategies

1. Reduce food insecurity among low income elementary age children and their families in Wards 7 and 8 and increase their consumption of fresh fruits and vegetables through use of Martha's Table Joyful Markets Program.

ADOLESCENT HEALTH

Priority: Improving adolescent access to and utilization of primary care and behavioral health services

Priority: Enhancing positive youth development for adolescents to decrease high-risk behaviors (teen pregnancy, STIs, violence)

- Goal: Decrease youth violence including bullying and partner violence
- Goal: Reduce sexually transmitted infections and unintended pregnancies
- Goal: Increase access to and coordination of behavioral health systems

NPM 9: Bullying

Objectives:

1. Decrease bullying amongst adolescents 12 through 17.

Strategies:

1. Provide resources to support programs that reduce youth violence, including bullying.
 - a. Pilot the Second Step Program in District of Columbia Public and Charter Schools.
 - b. Assess DCPS and PCS capacity to reduce violence and improve school climate.
 - c. Provide evidenced-based mental health services in school and community based settings through the Resilient Scholars Program (RSP).
 - d. Partner with OSSE to provide suicide prevention initiatives.

SPM 2: Teen Pregnancy Prevention

Objectives: Decrease the teen birth rate.

Strategies:

1. Implement school based teen pregnancy prevention programs in priority Wards 5-8 to reduce incidents of repeat teen births and sexually transmitted infections (Crittenton, SNEAKERS and PEARLS; Sasha Bruce Outreach Program (TOP)).

SPM 3: Interpersonal Violence

Objectives:

1. Decrease percent adolescents in grades 9-12 involved in a physical fight.

Strategies:

1. Expand partnerships, including those with non-traditional partners, in state/jurisdiction violence prevention coalitions using CDC's Essentials for Childhood Framework.
2. Work with schools to increase implementation of evidenced-based multi-component suicide prevention programs, such as Sources of Strength, the Model Adolescent Suicide Prevention Program, and the Program in Education, After school, and Resiliency (PEAR).

CHILDREN WITH SPECIAL HEALTH CARE NEEDS

Priority: Enhancing use of medical home and transitional services for CYSHCN

- Goal: Increase the use of transition planning for adolescents with and without special health care needs.
- Goal: Increase number of adolescents with and without special health care needs receiving recommended preventive health services.

NPM 12: Transition

Objectives:

1. Increase the percent of adolescents with and without special healthcare needs who received services necessary to make transitions to adult health care.

Strategies:

1. Support programs and initiatives to transition adolescents with CSHCN from pediatric to adult healthcare.
 - a. Implement Six Core Elements of Health Care Transition in District school based health centers, core service agencies participating in Department of Behavioral Health's Transition-Aged Youth Initiative and a pediatric ambulatory care center.
 - b. Establish a baseline of Health Care Transition (HCT) knowledge and skills among Anacostia SBHC users in order to develop health education class content.
 - c. Increase the number of DC high school students served by SBHCs who receive a HCT policy, a transition readiness assessment, and information about available adult providers
 - d. Increase number of health care providers receiving education and training on evidence-informed transition strategies.
 - e. Establish a transition policy and assessment tool for the Goldberg Center at Children's National Medical Center (CNMC) to target youth with and without special health care needs, ages 16-22 years.

CROSS-CUTTING/ LIFE COURSE

Priority: Improving maternal and child oral health

Priority: Reducing chronic disease burden (including obesity) among children and youth

- Goal: Increase identification of dental home among women and children
- Goal: Develop comprehensive oral health surveillance system

NPM 13: Oral Health

Objectives:

1. Increase the percent of women who had a dental visit during pregnancy.
2. Increase percent of children, ages 1 to 17, who had a preventive dental visit in the past year.

Strategies:

1. Implement a state oral health surveillance system.
2. Increase the number of reproductive age women and children engaged in preventive oral care.

- a. Provide oral health training and increase awareness of oral health issues and preventive care among health care providers and social service personnel.
- b. Outreach and education to perinatal programs (WIC, Healthy Start, MIECHV) and early education centers to facilitate linkages to preventive oral health.
- c. Provide school based preventive dentistry services.
- d. Provide parent and teacher oral health education sessions to increase awareness of oral health issues and prevention.

NPM 14: Smoking during Pregnancy and Household Smoking

Objectives:

1. Reduce the percent of woman smoking during pregnancy.
2. Reduce the percent of children who live in households where someone smokes.

Strategies:

1. Increase assessment of tobacco use and cessation resources for pregnant and postpartum women.
 - a. Promote Tobacco Cessation among perinatal programs (WIC, MIECHV and Healthy Start) through mobile health and outreach.
 - b. Assess tobacco use among parents and perinatal women through the Adult Tobacco Survey and PRAMS.
 - c. Improve cessation training for clinical and other health providers working with perinatal populations.